PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

293102002900

CLAIMS AS FILED - PART I (Column 1)						mn 2\		SMALL ENTITY TYPE		0.0	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			38		(Column 2)		1			OR 1 1		
								-	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			38 minus 20=		. 18			X\$ 9=	162	OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		-	0		X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT							:	+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		TOTAL	517	OR	TOTAL	
	C	LAIMS AS A	MENDED - PART II								OTHER	THAN
(Column 1) (Column 2)						(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	L	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	CL AIM	=		X40=		OR	X80=	
	TINOTTHESE	NATION OF ME	DETIFIE DEF	LIVERI	CLAIN			+135=		OR	+270=	
							•	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)										• .	ADDIT. FEET	·
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	166	OR	X\$18=	_ FEE
	Independent	*	Minus	***		=		X40=			X80=	
٩	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM					OR	7.00-	
							l	+135=		OR	+270=	
							,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MI	Minus	***	T CL AINA	=		X40=		OR	X80=	
<u> </u>	TINOT PRESE	INTATION OF MI	JEIIFEE DEF	EINDEIN	CLAIM		\ 	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											TOTAL ADDIT. FEE umn 1.	